

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		APPLICANT ACCOMPLISHMENT		APPLICANT'S ACCOMPLISHMENT	
	CID	DEP	CID	DEP	CID	DEP
1						
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TOTAL IND.	3					
TOTAL DEP.	15					
TOTAL CLAIMS	18					

	AS FILED		APPLICANT ACCOMPLISHMENT		APPLICANT'S ACCOMPLISHMENT	
	CID	DEP	CID	DEP	CID	DEP
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						